

APPENDIX 3

Application Requesting Approval for a Wall From ALMA

Please complete this application and a general sketch of the proposed wall showing its approximate location on the Lake relative to your property.

If there is insufficient room on this form please supplement your response with additional paper.

Send this application to ALMA, P.O. Box 3, Andover, CT 06232

1. Print name, address, phone no. and e-mail of the owner of the property:

ELLEN CALLHOT 860-670-2670
326 LAKE Rd. 860-742-4199

2. ALPOA Member # 446. Name of Homeowners Insurance Co.

Homeowners Insurance ID # _____

3. Description of work to be completed including dimensions of the wall:

REBUILD THE EXISTING WALL ON THE WATER FRONT
75' X 3 1/2'

4. Proximity of wall to septic system and leach fields:

150'

5. Changes to shoreline/lake bottom as a function of installing/repairing the wall:

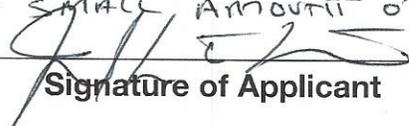
N/A

6. General description of location where the wall will be installed in relation to the shoreline and your property: ON THE SHORELINE

7. Is your proposed wall consistent with the material requirements set forth in the "Retaining Walls" paragraph? YES

8. What materials will the Retaining Wall be made of? Also, list the length and height of the retaining wall. 75' X 3 1/2' RE-USING THE EXISTING

WALL MATERIAL WITH THE POSSIBILITY OF BRINGING IN A SMALL AMOUNT OF NATURAL WALL STONE


Signature of Applicant

10/27/2021
Date

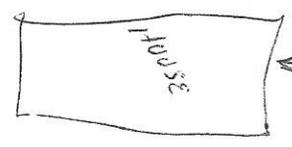
EILEEN GUNCLYOT 326 CAKE RD.

ANDOVER CAKE
SILT FENCE

STRAW BALES
AS NEEDED

75'

150'



SEPTIC

WELL

322 CAKE RD.
CHARLES ARMANH

336 CAKE RD.
CLORINA DIANZI

CAKE RD.

